

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

Office Use Only
11 OCT 15 PM 5:45

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type
over the lines.

12FE4M5

Bob Casey for Senate Inc

ADDRESS (number and street) P.O. Box 58746

☐ Check if different
than previously
reported. (ACC)

Philadelphia

CITY

PA

STATE

19102

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C00431056

3. IS THIS
REPORT

☐ NEW
(N)

OR

☒ AMENDED
(A)

STATE

DISTRICT

PA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)

☒ July 15 Quarterly Report (Q2)

☐ October 15 Quarterly Report (Q3)

☐ January 31 Year-End Report (YE)

(b) 12-Day PRE-Election Report for the:

☐ Primary (12P)

☐ General (12G)

☐ Runoff (12R)

☐ Convention (12C)

☐ Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

☐ General (30G)

☐ Runoff (30R)

☐ Special (30S)

☐ Termination Report (TER)

Election on

in the
State of

5. Covering Period

04/01/2014

through

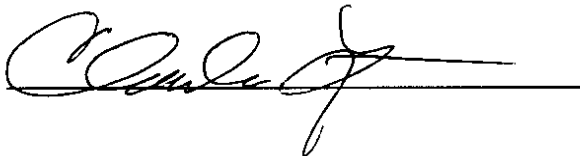
06/30/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Charles Lyons

Signature of Treasurer



Date

10/14/14

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the Penalties of 2 U.S.C. 437g.

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FEC FORM 3
(Revised 02/2003)